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| APPLICATION NUMBER | FILING RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 10 007,747         | 12 07 2001          | Lorrie P. Daggett     | SD9383CDB              |

CONFIRMATION NO. 3880

## FORMALITIES LETTER



\*OC000000007709059\*

 Merck & Co., Inc.  
 Patent Department  
 RY60-30  
 P.O. Box 2000  
 Rahway, NJ 07065-0907

Date Mailed: 03/25/2002

## NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

*Filing Date Granted*

The U.S. Patent and Trademark Office has received your reply on 02/11/2002 to the Notice to File Missing Parts (Notice) mailed 12/28/2001 and it has been entered into the nonprovisional application. The reply, however, does not include the following items required in the Notice

The period of reply remains as set forth in the Notice. You may, however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a) accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

*A copy of this notice MUST be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



TOTAL AMOUNT OF PAYMENT

\$400

Complete if Known

Application Number 10/007,747  
Filing Date December 7, 2001  
First Named Inventor Daggett, et al.  
Examiner Name  
Group Art Unit  
Attorney Docket Number SD9383CDB

METHOD OF PAYMENT (Check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 13-2755

Deposit Account Name Merck & Co., Inc.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code | Entity Fee (\$) | Fee Description        | Fee Paid |
|----------------|-----------------|------------------------|----------|
| 101            | 740             | Unity filing fee       |          |
| 106            | 330             | Design filing fee      |          |
| 108            | 740             | Reissue filing fee     |          |
| 114            | 160             | Provisional filing fee |          |
| SUBTOTAL(1)    |                 |                        | \$0      |

2. EXTRA CLAIM FEES

|                           | Extra   | Fee from below | Fee Paid |
|---------------------------|---------|----------------|----------|
| Total Claims              | 20 ** = | 0 x \$18 =     | 0        |
| Independent Claims        | 3 ** =  | 0 x \$84 =     | 0        |
| Multiple Dependent Claims |         | \$280 =        |          |

\*\*or number previously paid, if greater; For Reissues, see below

| Large Fee Code | Entity Fee (\$) | Fee Description   |
|----------------|-----------------|---|
| 103            | 18              | Claims in excess of 20                                    |
| 102            | 84              | Independent claims in excess of 3                         |
| 104            | 280             | Multiple dependent claim, if not paid                     |
| 109            | 84              | **Reissue independent claims over original patent         |
| 110            | 18              | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL(2) \$0

3. ADDITIONAL FEES

| Large Fee Code      | Entity Fee (\$) | Fee Description  | Fee Paid |
|---------------------|-----------------|--|----------|
| 105                 | 130             | Surcharge - late filing fee or oath  |          |
| 147                 | 2,520           | For filing a request for reexamination                                     |          |
| 115                 | 110             | Extension for reply within first month                                     |          |
| 116                 | 400             | Extension for reply within second month                                    | 400      |
| 117                 | 920             | Extension for reply within third month                                     |          |
| 118                 | 1,440           | Extension for reply within fourth month                                    |          |
| 128                 | 1,960           | Extension for reply within fifth month                                     |          |
| 119                 | 320             | Notice of Appeal   |          |
| 120                 | 320             | Filing a brief in support of an appeal                                     |          |
| 121                 | 280             | Request for oral hearing   |          |
| 140                 | 110             | Petition to revive - unavoidable   |          |
| 141                 | 1,280           | Petition to revive - unintentional   |          |
| 142                 | 1,280           | Utility issue fee (or reissue)   |          |
| 143                 | 460             | Design issue fee   |          |
| 122                 | 130             | Petitions to the Commissioner  |          |
| 123                 | 50              | Petitions related to provisional applications                              |          |
| 126                 | 180             | Submission of Information Disclosure Statement                             |          |
| 581                 | 40              | Recording each patent assignment per property (times number of properties) |          |
| 146                 | 740             | Filing a submission after final rejection (37 CFR 1.129(a))                |          |
| 149                 | 740             | For each additional invention to be examined (37 CFR 1.129(b))             |          |
| 179                 | 740             | Request for Continued Examination (RCE)                                    |          |
| Other fee (specify) |                 |  |          |
| Other fee (specify) |                 |  |          |
| SUBTOTAL(3)         |                 |  | \$400    |

SUBMITTED BY:

Complete (if applicable)

Typed or Printed Name

Vineet Kohli

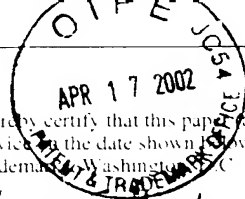
Reg. Number 37.003

Signature

Date

4/10/02

Deposit Account User ID



## CERTIFICATE OF MAILING

Thereby certify that this paper along with any paper referred to as being attached or enclosed is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Commissioner of Patents and Trademarks, Washington, DC 20231.

Name Nancy E. YorkeSignature Nancy E. YorkeDate April 10, 2002PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Daggett, et al.

Parent Serial 10/007,747 - Case No.: SD9383CDB  
No.:

Filed: December 7, 2001

For: HUMAN N-METHYL-D-ASPARTATE  
RECEPTOR SUBUNITS, NUCLEIC ACIDS  
ENCODING SAME AND USES THEREFOR

Art Unit:

Examiner:  
UnknownAssistant Commissioner for Patents  
Washington, DC 20231ATTENTION: Official DraftsmanTRANSMITTAL OF FORMAL DRAWINGS

Sir:

Submitted herewith are FIGS. 1-6 on seven (7) sheets of Formal Drawings.  
The Formal Drawings address the informalities noted in the Notice Re Patent Drawings.

Should communication with the undersigned representative facilitate the  
review and the acceptance of the enclosed drawings, the Official Draftsman is invited to  
telephone the representative at the number listed below.

Respectfully submitted,

By Vineet Kohli

Vineet Kohli  
Reg. No. 37,003  
Attorney for Applicant  
MERCK & CO., INC.  
P.O. Box 2000  
Rahway, New Jersey 07065-0907  
(732) 594-3889

Date: 4/10/02



FEE TRANSMITTAL

Patent fees are subject to annual revision

Complete if Known

|                        |                  |
|------------------------|------------------|
| Application Number     | 10:007,747       |
| Filing Date            | December 7, 2001 |
| First Named Inventor   | Daggett, et al.  |
| Examiner Name          |                  |
| Group Art Unit         |                  |
| Attorney Docket Number | SD9383CDB        |

AMOUNT OF PAYMENT

\$400

| METHOD OF PAYMENT (Check one)   |                 |  |          | FEE CALCULATION (continued)   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
|---|-----------------|--|----------|---|-----------------|-----------------|----------|---|-----------------|--------------------|----------|--|-----|-------------------------------------|---|---------------------------|-------|--|--|----------------|-----------------|--|----------|-------------|-----|---|-----|-----|-----|--|--|-----|-------|---|--|-----|-------|---|--|-----|-----|---|--|-------------|-----|--|-----|-----|-----|--------------------------|--|-----|-----|----------------------------------|--|-----|-------|------------------------------------|--|-----|-------|--------------------------------|--|-----|-----|------------------|--|-----|-----|-------------------------------|--|-----|----|---|--|-----|-----|--|--|-----|----|--|--|-----|-----|---|--|-----|-----|--|--|-----|-----|---|--|---------------------------|--|--|--|---------------------------|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to</p> <p>Deposit Account Number <u>13-2755</u></p> <p>Deposit Account Name <u>Merck &amp; Co., Inc.</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p>  |                 |  |          | <p>3. ADDITIONAL FEES</p> <table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr><tr><td>115</td><td>110</td><td>Extension for reply within first month</td><td></td></tr><tr><td>116</td><td>400</td><td>Extension for reply within second month</td><td>400</td></tr><tr><td>117</td><td>920</td><td>Extension for reply within third month</td><td></td></tr><tr><td>118</td><td>1,440</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>128</td><td>1,960</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>119</td><td>320</td><td>Notice of Appeal</td><td></td></tr><tr><td>120</td><td>320</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>121</td><td>280</td><td>Request for oral hearing</td><td></td></tr><tr><td>140</td><td>110</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>141</td><td>1,280</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>142</td><td>1,280</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>143</td><td>460</td><td>Design issue fee</td><td></td></tr><tr><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr><tr><td>126</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr><tr><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>146</td><td>740</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>149</td><td>740</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>179</td><td>740</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td colspan="3">Other fee (specify) _____</td><td></td></tr><tr><td colspan="3">Other fee (specify) _____</td><td></td></tr></tbody></table> |                 |                 |          | Large Fee Code                                | Entity Fee (\$) | Fee Description    | Fee Paid | 105  | 130 | Surcharge - late filing fee or oath |   | 147                       | 2,520 | For filing a request for reexamination |  | 115            | 110             | Extension for reply within first month |          | 116         | 400 | Extension for reply within second month | 400 | 117 | 920 | Extension for reply within third month |  | 118 | 1,440 | Extension for reply within fourth month |  | 128 | 1,960 | Extension for reply within fifth month            |  | 119 | 320 | Notice of Appeal  |  | 120         | 320 | Filing a brief in support of an appeal |     | 121 | 280 | Request for oral hearing |  | 140 | 110 | Petition to revive - unavoidable |  | 141 | 1,280 | Petition to revive - unintentional |  | 142 | 1,280 | Utility issue fee (or reissue) |  | 143 | 460 | Design issue fee |  | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | Submission of Information Disclosure Statement |  | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 740 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 179 | 740 | Request for Continued Examination (RCE) |  | Other fee (specify) _____ |  |  |  | Other fee (specify) _____ |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 105   | 130             | Surcharge - late filing fee or oath  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 147   | 2,520           | For filing a request for reexamination                                     |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 115   | 110             | Extension for reply within first month                                     |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 116   | 400             | Extension for reply within second month                                    | 400      |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 117   | 920             | Extension for reply within third month                                     |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 118   | 1,440           | Extension for reply within fourth month                                    |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 128   | 1,960           | Extension for reply within fifth month                                     |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 119   | 320             | Notice of Appeal   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 120   | 320             | Filing a brief in support of an appeal                                     |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 121   | 280             | Request for oral hearing   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 140   | 110             | Petition to revive - unavoidable   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 141   | 1,280           | Petition to revive - unintentional   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 142   | 1,280           | Utility issue fee (or reissue)   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 143   | 460             | Design issue fee   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 122   | 130             | Petitions to the Commissioner  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 123   | 50              | Petitions related to provisional applications                              |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 126   | 180             | Submission of Information Disclosure Statement                             |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 581   | 40              | Recording each patent assignment per property (times number of properties) |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 146   | 740             | Filing a submission after final rejection (37 CFR 1.129(a))                |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 149   | 740             | For each additional invention to be examined (37 CFR 1.129(b))             |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 179   | 740             | Request for Continued Examination (RCE)                                    |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Other fee (specify) _____   |                 |  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Other fee (specify) _____   |                 |  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>  |                 |  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| <p>FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>Design filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="3">SUBTOTAL(1)</td><td>\$0</td></tr></tbody></table>  |                 |  |          | Large Fee Code  | Entity Fee (\$) | Fee Description | Fee Paid | 101   | 740             | Utility filing fee |          | 106  | 330 | Design filing fee                   |   | 108                       | 740   | Reissue filing fee                     |  | 114            | 160             | Provisional filing fee                 |          | SUBTOTAL(1) |     |   | \$0 |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 101   | 740             | Utility filing fee   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 106   | 330             | Design filing fee  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 108   | 740             | Reissue filing fee   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 114   | 160             | Provisional filing fee   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| SUBTOTAL(1)   |                 |  | \$0      |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| <p>2. EXTRA CLAIM FEES</p> <table><thead><tr><th></th><th>Extra</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total Claims <u>20</u> ** = <u>0</u> x \$18 =</td><td></td><td></td><td>0</td></tr><tr><td>Independent Claims <u>3</u> ** = <u>0</u> x \$84 =</td><td></td><td></td><td>0</td></tr><tr><td>Multiple Dependent Claims</td><td></td><td>\$280 =</td><td></td></tr></tbody></table> <p>**or number previously paid, if greater; For Reissues, see below</p> <table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>84</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>280</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109</td><td>84</td><td>**Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="3">SUBTOTAL(2)</td><td>\$0</td></tr></tbody></table> |                 |  |          |   | Extra           | Fee from below  | Fee Paid | Total Claims <u>20</u> ** = <u>0</u> x \$18 = |                 |                    | 0        | Independent Claims <u>3</u> ** = <u>0</u> x \$84 = |     |                                     | 0 | Multiple Dependent Claims |       | \$280 =                                |  | Large Fee Code | Entity Fee (\$) | Fee Description                        | Fee Paid | 103         | 18  | Claims in excess of 20                  |     | 102 | 84  | Independent claims in excess of 3      |  | 104 | 280   | Multiple dependent claim, if not paid   |  | 109 | 84    | **Reissue independent claims over original patent |  | 110 | 18  | **Reissue claims in excess of 20 and over original patent |  | SUBTOTAL(2) |     |  | \$0 |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
|   | Extra           | Fee from below   | Fee Paid |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Total Claims <u>20</u> ** = <u>0</u> x \$18 =   |                 |  | 0        |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Independent Claims <u>3</u> ** = <u>0</u> x \$84 =  |                 |  | 0        |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Multiple Dependent Claims   |                 | \$280 =  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| Large Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 103   | 18              | Claims in excess of 20   |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 102   | 84              | Independent claims in excess of 3  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 104   | 280             | Multiple dependent claim, if not paid                                      |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 109   | 84              | **Reissue independent claims over original patent                          |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| 110   | 18              | **Reissue claims in excess of 20 and over original patent                  |          |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
| SUBTOTAL(2)   |                 |  | \$0      |   |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |
|   |                 |  |          | <p>SUBTOTAL(3) \$400</p>  |                 |                 |          |   |                 |                    |          |  |     |                                     |   |                           |       |  |  |                |                 |  |          |             |     |   |     |     |     |  |  |     |       |   |  |     |       |   |  |     |     |   |  |             |     |  |     |     |     |                          |  |     |     |                                  |  |     |       |                                    |  |     |       |                                |  |     |     |                  |  |     |     |                               |  |     |    |   |  |     |     |  |  |     |    |  |  |     |     |   |  |     |     |  |  |     |     |   |  |                           |  |  |  |                           |  |  |  |

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| SUBMITTED BY          |              |                         | Complete (if applicable) |  |
|-----------------------|--------------|-------------------------|--------------------------|--|
| Typed or Printed Name | Vineet Kohli | Reg. Number             | 37.003                   |  |
| Signature             |              | Date                    | 4/10/02                  |  |
|                       |              | Deposit Account User ID |                          |  |

Application Number:

10/007,747

Filing Date:

12/07/2001

First Named Inventor:

Daggett, et al.

Group Art Unit:

Examiner Name:

Attorney Docket Number:

SD9383CDB

### FIRST CLASS MAIL CERTIFICATE

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: ASSISTANT COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231, ON THE DATE APPEARING BELOW.

MERCK & CO., INC.

MAILED BY

*Nancy York*

DATE

*April 10, 2002*